

## APPRENTICESHIP INFORMATION CENTER APPLICATION

COMPLETE, PRINT OUT AND E-MAIL SCANNED ATTACHMENT TO <a href="mailto:patrick.durkin@illinois.gov">patrick.durkin@illinois.gov</a> OR FAX TO 312-793-1778.

Social Security Number: (last 4 only)		Today's Date:	
Last Name:	First:		M:
Mailing address:		Apt: (Optional)	
City: (	County:	State:	Zip code:
Phone: Date	e of birth:	Male:	Female:
E-mail:	Legal	ly authorized to work in t	he US? Yes: No:
Are you currently in school? Yes:	No:		
Highest grade of school completed: Grad	des (1-12): HS dip	loma or GED:	College degree:
Which best describes your ethnic backgr	ound? (For statistical purp	oses only):	
1. White 2. Black 3. Hispanic _	4. Native American	_ 5. Pacific Islander/Asia	n 6. Other
Do you have a driver's license? Yes:	No: Are you cur	rently working? Yes:	_ No:
What skilled crafts would you pursue in a Then to the orange Individuals bar > Seal page to visit statewide trade links for a v	rch for Jobs > Special Progra	ams > <u>Apprenticeship</u> . Sc	roll to the bottom of the
l 2	3	4	
Many apprenticeship programs require t able, and available to work in?	ravel to different work sites	s. In what county/countie	es would you be willing,
l 2	3		
<<<<< Be sure to register a	t <u>www.illinoisjoblink.con</u>	n for all other job oppo	ortunities >>>>>
<u>Veterans</u> : If you served in the US Armed	Forces or are a spouse of a	veteran, please complete	e this section:
Have you served on active duty in the U. Guard or Reserve? Yes: No:	S. Armed Forces for more th	nan 181 days for other th	an training for the National
Have you served as a National Guard or I campaign or expedition for which a camp		, .	ially defined as a war or in a
Are you the spouse of a Veteran? Yes: _	No:		
User form AIC-589 (Rev. 5/2/16)	Stock No. 6021 II 427-0	0412	